

ADULT IMMUNIZATION RECORD

Name _____

Date of Birth _____

Vaccine	Dose	Date	Validation	Next Dose
Hepatitis A Adults at risk	1			
	2			
Hepatitis B Adults at risk	1			
	2			
	3			
Influenza Adults 65 years and older. Adults with high risk conditions. Adults who do not want to get the flu	Yearly			
	Yearly			
	Yearly			
	Yearly			
	Yearly			
	Yearly			
	Yearly			
Measles, Mumps, Rubella (MMR) Adults born after 1956	1			
	2			
Pneumococcal Adults 65 & older Adults at risk	1			
	Repeat			
Tetanus and Diphtheria (Td) Booster every ten years if adult has had at least three basic shots	Booster			
	Booster			
	Booster			
	Booster			
	Booster			
Varicella (Chickenpox) Adults who have not had varicella	1			
	2			
Mantoux (TB) or Chest x-ray annually, unless otherwise ordered				RESULTS